



DEPARTMENT OF AGRICULTURE
Caraga Region
Capitol Site, Butuan City
Tel. No: (085) 342-4092 Telefax No.: (085) 341-2114

REQUEST FOR QUOTATION

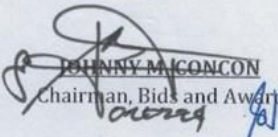
Date: _____
Quotation #: _____

Name of Company _____

Address _____

TIN _____

Please quote your lowest price inclusive of taxes in the items/s listed, subject to the General Conditions below, stating the shortest time of delivery. Submit your quotation duly signed by your representative not later than **3 days upon receipt** in sealed envelope marked with the reference no. (PR# 24-01-11032).


JOHNNY MICONCON
Chairman, Bids and Awards Committee

ITEM NO.	ITEM & DESCRIPTION	BRAND	UNIT	QUANTITY	UNIT COST	TOTAL COST
	Lot 1 MEDICAL, DENTAL & LAB. SUPPLIES					
	Surgical blade #10, 100pcs/box		box	12		
	Surgical blade #24, 100pcs/box		box	12		
	Parafilm (Laboratory film) 4x125ft		roll	5		
	Scalpel handle #3		pcs	5		
	Scalpel handle #4		pcs	5		
	Microscope cover glass 22x22mm No. 1		box	10		
	Glass slide(72 pcs/box)		box	20		
	LBT tissue&thumb forcep		pcs	6		
	Lot 2 CHEMICAL AND FILTERING					
	Potato Dextrose Agar (PDA), 500g/bot,granulated		bot	16		
	Nutrient Agar, 500g/bot,granulated		bot	4		
	Note:					
	To be delivered at Regional Crop Protection Center					
	Trento, Agusan del Sur					

ABC: L1- 37,500
L2 - 127,400
Source of fund: ILD, OA

General Conditions:

- All entries must be typewritten/printed in ink.
- Delivery period within _____ calendar days based on the contract.
- Warranty shall be for a period of six (6) months for supplies & materials, one (1) year for equipment from date of acceptance by procuring entity.
- Price validity shall be for a period of _____ calendar days
- PhilGEPS Registration Certificate, Business Permit, DTI Certificate and Tax Registration Certificate shall be attached upon submission of the quotation, if applicable.
- Bidders shall submit original brochures showing specification of the products being offered.
- Winning bidder(s) from outside Butuan City must appear personally or sent authorized representative to signed contract and claimed payments.

After having carefully read and accepted your General Conditions, I/We quote on the item at prices noted above.

Printed Name/Signature of Company _____

Name and Signature of Canvasser _____

Tel. No. / CP No. / email address _____

Date _____